PATENT APPLICATION PEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number 10/536978

CLAIMS AS FILED - PART I

FEE EXTRA HARGEA	SPEC. PGS. BLE CLAIMS LAIMS IDENT CLAIM PR	SMALL E Satisfies PC: (4) = \$ U.S. is ISA = ALL other \$ 200 m	umn 1) NT. = \$ 150 T Article 33(1)- 50 / \$ 100 = \$ 50 / \$ 100 countries = / \$ 400 inus 100 = minus 20 = , minus 3 = ,	All	(Column 2) RGE.ENT. = \$ 300 other situations = \$ 100 / \$ 200 other situations = \$ 250 / \$ 500 / 50 =		RATE BASIC FEE EXAM. FEE SEARCH FEE	FEE	OF	RATE.	FEE 300
EXTRA HARGEA DENT CI	SPEC. PGS. BLE CLAIMS LAIMS IDENT CLAIM PR	Satisfies PC (4) = \$ U.S. is ISA = ALL other \$ 200 m	T Article 33(1)-50 / \$ 100 = \$ 50 / \$ 100 countries = / \$ 400 inus 100 = minus 20 = ,	All	other situations = \$ 100 / \$ 200 other situations = \$ 250 / \$ 500		BASIC FEE	FEE	OR	BASIC FEE	300 200
FEE EXTRA HARGEA DENT CI	SPEC. PGS. BLE CLAIMS LAIMS IDENT CLAIM PR	Satisfies PC (4) = \$ U.S. is ISA = ALL other \$ 200 m	T Article 33(1)-50 / \$ 100 = \$ 50 / \$ 100 countries = / \$ 400 inus 100 = minus 20 = ,	All	other situations = \$ 100 / \$ 200 other situations = \$ 250 / \$ 500		EXAM. FEE		OR	EXAM. FEE	200
EXTRA HARGEA DENT CI	ABLE CLAIMS LAIMS IDENT CLAIM PR	U.S. is ISA = ALL other \$ 200	= \$ 50 / \$ 100 countries = / \$ 400 inus 100 = minus 20 =	All	other situations = \$ 250 / \$ 500	1 1					
HARGEA DENT CI	ABLE CLAIMS LAIMS IDENT CLAIM PR	84 n	inus 100 = ninus 20 = ,			 				SEARCH FEE	115-
DENT C	LAIMS IDENT CLAIM PR	84 n	minus 20 = ,	• (700-		V 6 405		7		400
DENT C	LAIMS IDENT CLAIM PR	и		٠ (X \$ 125 =		1	X \$ 250 =	
DEPEN	IDENT CLAIM PR		minus 2 -		40		X \$ 25 =	<u> </u>	OR	X \$ 50 =	3200
			minus 3 = ,		8		X \$ 100 =		OR	X \$ 200 =	1690
nerenc						L	+ \$ 180 =		OR	+ \$ 360 =	360
If the difference in column 1 is less than zero, enter "0" in					olumn 2		TOTAL		OR	TOTAL	300
	(Column 1) CLAIMS REMAINING	AMENDE	(Column 2) (Column 3)			<u></u>	SMALL ENTITY			OTHER THAN SMALL ENTITY	
	AFTER AMENDMENT		PREVIOU PAID FO	SLY	PRESENT EXTRA	L	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
endent	•	Minus	***		=	. 3	X \$ 100 =	4	OR	X \$ 200 =	
T PRES	ENTATION OF M	ULTIPLE DEP	ENDENT CL	AIM		1	+ \$ 180 =		OR	+ \$ 360 =	
						TC	TAL ADDIT. FEE		OR	TOTAL ADDIT.	
	(Column 1)		(Column	2)	(Column 3)						
	CLAIMS REMAINING AFTER AMENDMENT		NUMBER PREVIOUS	R LY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	ſ	RATE	ADDI- TIONAL FEE
	<u> </u>	Minus	**		=	>	(\$25=		OR -	X \$ 50 =	
ndent	*	Vinus	***		=	X	\$ 100 =		-		
AMENDMENT PAID FOR Total * Minus ** = Independent * Minus *** = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			-	<u> </u> -	
PRESE						TO	TAL ADDIT. FEE		ᆫ	OTAL ADDIT.	——
_	dent	CLAIMS REMAINING AFTER AMENDMENT * dent *	CLAIMS REMAINING AFTER AMENDMENT * Minus dent * Minus	CLAIMS REMAINING AFTER AMENDMENT Minus CLAIMS HIGHES PREVIOUS PAID FOI * Minus **	CLAIMS REMAINING AFTER AMENDMENT * Minus CLAIMS REMAINING AFTER AMENDMENT * Minus *** Minus	CLAIMS REMAINING AFTER AMENDMENT Minus COUNTIN 2) HIGHEST NUMBER PREVIOUSLY PAID FOR * Minus ** = = =	(Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT HIGHEST NUMBER PREVIOUSLY PREVIOUSLY PAID FOR PRESENT * Minus *** = dent * Minus *** = PRESENTATION OF MULTIPLE DEPENDENT CLAIM + +	(Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT * Minus ** Minus *** PRESENT EXTRA RATE X \$ 25 = X \$ 100 = PRESENTATION OF MULTIPLE DEPENDENT CLAIM TOTAL ADDIT.	(Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT Minus ** Minus ** Minus *** PRESENT EXTRA RATE ADDI- TIONAL FEE X \$ 25 = X \$ 100 = PRESENTATION OF MULTIPLE DEPENDENT CLAIM TOTAL ADDIT.	(Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR * Minus ** Minus ** PRESENT EXTRA RATE ADDI- TIONAL FEE OR X \$ 25 = OR OR OR PRESENTATION OF MULTIPLE DEPENDENT CLAIM TOTAL ADDIT. OR TOTAL ADDIT. OR TOTAL ADDIT.	(Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT Minus *** Minus *** PRESENT FEE OR FEE OR FEE OR FEE OR FEE OR FEE OR FATE ADDI- TIONAL FEE OR RATE RATE PRESENT TIONAL FEE OR ** ** ** ** ** ** ** ** **

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".

[&]quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".